

dk



July 30, 2007

Via UPS Next Day

Ms. Pam Grubaugh-Littig
Utah Department of Natural Resources
Division of Oil, Gas and Mining
1594 West North Temple, Suite 1210
Salt Lake City, UT 84114-5801

Re: Canyon Fuel Company, LLC/Mountain Coal Company, L.L.C.
Certificates of Liability Insurance

Triproof
4/007/0003
4/007/0018
4/007/0034
4/007/0039
4/041/0002
4/007/0016

Dear Ms. Grubaugh-Littig:

Enclosed are new Certificates of Liability Insurance for the following:

Canyon Fuel Company, LLC: Permits: C007005, C007018, C007039
C007034, C0041002

Mountain Coal Company, L.L.C.: Permit: ACT/007/016

I trust you will find the enclosures to be in order.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Stacy Allen'.

Stacy Allen
Risk Management Department

Enclosures

cc: Rick Parkins, Arch Western Bituminous Group
Chris Hansen, CFC-Skyline
Mike Davis, CFC-Sufco
Vicky Miller, CFC-Dugout
Henry Barbe, MCC
Phil Schmidt, MCC

RECEIVED

JUL 31 2007

DIV. OF OIL, GAS & MINING

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
CHI-000333513-12

PRODUCER

Marsh USA Inc.
701 Market Street, Suite 1100
St. Louis, MO 63101
Attn: archcoal.certrequest@marsh.com

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

COMPANY

A ACE AMERICAN INSURANCE COMPANY

COMPANY

B

COMPANY

C

COMPANY

D

001950-state-GL8-07-08

Y

INSURED

Canyon Fuel Company, LLC
c/o Arch Western Bituminous Group, L.L.C.
225 N. 5th Street, Suite 900
Grand Junction, CO 81501

COVERAGES

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

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THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY <div><div>X</div> COMMERCIAL GENERAL LIABILITY <div><div></div> CLAIMS MADE</div> <div><div>X</div> OCCUR</div><div>OWNER'S & CONTRACTOR'S PROT</div><div>X Includes XCU</div></div>	HDO G2 3732920 *****\$500,000 general aggregate *****per location*****	07/31/07	07/31/08	GENERAL AGGREGATE	\$ * 500,000
				PRODUCTS - COMP/OP AGG	\$ 500,000	
				PERSONAL & ADV INJURY	\$ 300,000	
				EACH OCCURRENCE	\$ 300,000	
				FIRE DAMAGE (Any one fire)	\$ 50,000	
				MED EXP (Any one person)	\$ 5,000	
	AUTOMOBILE LIABILITY <div><div></div> ANY AUTO <div></div> ALL OWNED AUTOS <div></div> SCHEDULED AUTOS <div></div> HIRED AUTOS <div></div> NON-OWNED AUTOS</div>			COMBINED SINGLE LIMIT	\$	
				BODILY INJURY (Per person)	\$	
				BODILY INJURY (Per accident)	\$	
				PROPERTY DAMAGE	\$	
	GARAGE LIABILITY <div><div></div> ANY AUTO</div>			AUTO ONLY - EA ACCIDENT	\$	
				OTHER THAN AUTO ONLY:		
				EACH ACCIDENT	\$	
				AGGREGATE	\$	
	EXCESS LIABILITY <div><div></div> UMBRELLA FORM <div></div> OTHER THAN UMBRELLA FORM</div>			EACH OCCURRENCE	\$	
				AGGREGATE	\$	
					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <div>THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE:</div> <div><div></div> INCL <div></div> EXCL</div>			<div><div></div> WC STATU- TORY LIMITS</div> <div><div></div> OTH- ER</div>		
				EL EACH ACCIDENT	\$	
				EL DISEASE-POLICY LIMIT	\$	
				EL DISEASE-EACH EMPLOYEE	\$	
	OTHER					

1	DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
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Permit Dug Out Canyon Mine C007039
Blasting and use of explosives is not excluded under the policy.

CERTIFICATE HOLDER

Utah Dept. Of Natural Resources
Division of Oil, Gas and Mining
1594 W. North Temple
Suite 1210
Salt Lake City, UT 84114-5801

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ~~EMAIL~~ MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN. ~~BUT FAILURE TO DO SO DOES NOT CONSTITUTE A BREACH OF CONTRACT OR~~
~~VOID ANY OF THE POLICIES OR POLICY COVERAGE. NO AGENTS OR REPRESENTATIVES OF THE~~
~~INSURER OR ANY OF ITS AFFILIATES SHALL BE RESPONSIBLE FOR THE CANCELLATION OF ANY OF THE~~

MARSH USA INC.

BY: Alfred A. Peterfeso

MM1(3/02)

Arthur O. Peterson

VALID AS OF: 07/30/07